## ARIZONA FORM 140A

## Resident Personal Income Tax Return (Short Form)

2004

YOUR FIRST NAME AND INITIAL			LAST NAME		YOUR SOCIAL SECURITY NO.		
IF A JOINT RETURN, SPOUSE'S FIRST NAME AND INITIAL			LAST NAME		SPOUSE'S	SPOUSE'S SOCIAL SECURITY NO.	
Р	1 RESE 2	ENT HOME ADDRESS - NUMBER AND STREET, RURAL ROUTE APT. NO.	DAYTIME PHONE WITH AREA CODE		↑ You n	↑ IMPORTANT ↑ You must enter your SSNs.	
l -	OME. 2	ADDRESS CONTINUED	HOME PHONE WITH AREA CODE			,	
C	ITY, T	OWN OR POST OFFICE STATE ZIP CODE	<del>                                    </del>	FOR DOR USE ONLY			
_	<u>3</u>	Manied filing igint not up		1			
Filing Status	5	Married filing joint return  Head of household - name of qualifying child or dependent:					
St	6	Married filing separate return. Enter spouse's Social Security Number above					
ij	and full name here. ▶			88			
_	$\perp$	Single					
Exemptions	8 Enter the Age 65 or over (you and/or spouse)			81	80		
noti	9	number claimed. Do Blind (you and/or spouse)		82 CHECK ONE if filing to	ınder an	extension:	
xen	10	not put a Dependents. From page 2, line A2 - do not includ	•	-		nth extension	82D
_				I al adjusted gross income		nth extension	82F
	l ''''	O BOX WINT BE BE WIN ON WINT CONTINUATE BY WOODE OF BY WINT TOWN TO	IIZ I Cacia	or over 13		12	
					-+	-	
		14 Blind 14 15 Dependents 15				†	
ď	46 Qualifying payants 46				1		
ent	17 Total subtractions. <i>Add lines 13 through 16</i>				igh 16	17	
a∨π	18 Arizona AGI. Subtract line 17 from line				ne 12	18	
Ω ≥	1		19 Standa	ard deduction		19	
h a				nal exemptions		20	
tac			<b>I</b>	able income. Line 18 minus line		21	
ot ai			<b>I</b>	m Optional Tax Rate Tables		22	
ō			<b>I</b>	ean Elections Fund Tax Reduc			
but do not attach any payments	<u></u>			1□ YOURSELF 23 <b>2</b> □ SPOU		. 24	
se b	25	Reduced tax. Subtract line 24 from line 22				25	
Enclose	27	Family income tax credit from worksheet on page 7 of instructions Subtract line 26 from line 25. If less than zero, enter zero				26	
ᇤ	28					28	
ë.		, •				29	
retur		Arizona income tax withheld during 2004				1	
he r	31	Amount paid with 2004 Arizona extension request (Form 204)		31		1	
oft	32 Increased Excise Tax Credit from worksheet on page 8 of the instructions					]	
page	33	3 Property Tax Credit from Form 140PTC					
last p	<del>  •</del>	Total payments/credits. Add lines 30 through 33				34	
of la		6. OVEDDAYMENT. If line 34 is larger than line 20. enter amount of overnayment				35	
ş	36 37					36	
W-2 to back		- 44 Voluntary Gifts to:  Aid to Education (entire refund only)  Child Abuse Prevention Special Olympics 43  Check only one if making a political gift: 451 Democratic 452 Libertarian 453 Republican  Total voluntary gifts: Add lines 37 through 44				]	
-2 te						]	
	ı						
Attach						40	
⋖						46	
	47	REFUND. Subtract line 46 from line 36. If less than zero, enter amount owed on line 48.  Direct Deposit of Refund: See instructions.  ROUTING NUMBER  ACCOUNT NUMBER  C Checking or Savings				71	
	48	AMOUNT OWED. Add lines 35 and 46. Make check payable to Arizona Department of Revenue; include SSN on payment.				48	
				· · ·			

PLEASE BE SURE TO SIGN THE RETURN ON THE REVERSE SIDE OF THIS PAGE.

Form 140A (2004) Page 2 of 2 PART A: Dependents and Qualifying Parents - do not list yourself or spouse A1 List children and other dependents. If more space is needed, attach a separate sheet. NO. OF MONTHS LIVED SOCIAL SECURITY NO. FIRST AND LAST NAME RELATIONSHIP IN YOUR HOME IN 2004 Enter the names of the dependents listed above who do not qualify as your dependent on your federal return. See page 5 of the instructions. List qualifying parents and ancestors of your parents. If more space is needed, attach a separate sheet. You cannot list the same person here and also on line A1. For information on who is a qualifying parent or ancestor of your parents, see page 5 of the instructions. NO. OF MONTHS LIVED FIRST AND LAST NAME SOCIAL SECURITY NO. RELATIONSHIP IN YOUR HOME IN 2004 PART B: Last Name(s) Used in Prior Years if different from name(s) used in current year **B6** I have read this return and any attachments with it. Under penalties of perjury, I declare that to the best of my knowledge and belief, they are true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. PLEASE SIGN HERE YOUR SIGNATURE DATE SPOUSE'S SIGNATURE DATE PAID PREPARER'S SIGNATURE FIRM'S NAME (PREPARER'S IF SELF-EMPLOYED)

If you are sending a payment with this return, mail to Arizona Department of Revenue, PO Box 52016, Phoenix, AZ, 85072-2016.

DATE

If you are expecting a refund or owe no tax, or owe tax but are not sending a payment, mail to Arizona Department of Revenue, PO Box 52138, Phoenix, AZ, 85072-2138.

PAID PREPARER'S ADDRESS

PAID PREPARER'S TIN